SI-100

(California Nonprofit, Credit Union and General Cooperative Corporations)

FILED Secretary of State State of California

21/20/PC

Filing Fee - \$20.00;

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees

IMPORTANT — Read instructions before completing this form.

1. Corporation Name (Enter the exact name of the corporation as it is currently recorded with the California Secretary of State)

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17-086213

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2. 7-Digit Secretary of State File Number

03947880

California Taxpayer Defense Alliance

3.	Business	Addresses
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a. Street Address of California Principal Office, if any - Do not list a P.O. Box 9460 Tegner Road	City (no abbreviations) Hilmar	State CA	Zip Code 95324
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code
P.O. Box 730	Hilmar	CA	95324

The Corporation is required to list all three of the officers set forth below. An additional title for Chief Executive Officer or Chief 4. Officers Financial Officer may be added; however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/ Edward "Ted"	First Name	Middle Name $M.$	Last Name Gaines		Suffix	
Address 1422 Souza Drive			City (no abbreviations) El Dorado Hills C.		Zip Code 95762	
b. Secretary Kelly	First Name	Middle Name	Last Name Lawler	<u> </u>	Suffix	
Address 9460 Tegner Road	***************************************		City (no abbreviations) Hilmar	State CA	Zip Code 95324	
c. Chief Financial Officer/ Kelly	First Name	Middle Name	Last Name Lawler		Suffix	
Address 9460 Tegner Road		City (no abbreviations) Hilmar	State CA	Zip Code 95324		

5. Agent for Service of **Process**

Item 5a and 5b: If the agent is an individual, the agent must reside in California and Item 5a and 5b must be completed with the agent's name and California address. Item 5c: If the agent is a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 5c must be completed (leave Item 5a-5b blank).

a. California Agent's First Name (If agent is not a corporation) Ashlee	Middle Name		Last Name Titus		Suffix
b. Street Address (if agent is not a corporation) - Do not list a P.O. Box 455 Capitol Mall, Suite 600		City (no abbreviations) Sacramento		State CA	Zip Code 95814

6. Common Interest Developments

Check here if the corporation is an association formed to manage a common interest development under the Davis-Sterling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See instructions.

7. The Information contained herein, including in any attachments, is true and correct.

Ashlee Titus

Type or Print Name of Person Completing the Form

Attorney-Agent